

# Disclosure Report Cover

Amendment  
☐ Yes ☐ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.  
Do not use this form to update information.

## 1. Committee Information

a. Full Name	c. ID Number
Edwin Elam campaign for mayor of waxhaw, NC	842349958
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
po box 123 waxhaw, nc 28173	11/4/2019
	e. Phone Number
	404-593-3702

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2019	06/12/2019	10/28/2019	richard gardner

6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>	<b>Referendum</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name		
<input type="checkbox"/> Booster Fund				
<input type="checkbox"/> Building Fund				
<input type="checkbox"/> Other:				
8. Number of Fundraisers this Report				

11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
First Citizens Bank			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
	000131810521		
	d. Period Begin Balance		d. Period Begin Balance
	\$200.00		\$

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

richard gardner

Printed Name of Signer

Signature of Appointed Treasurer

11/04/2019

Date

## FOR OFFICE USE ONLY

Date Received: 11/04/19

Employee: [Signature]

### Delivery Method

- ☐ Normal Mail  
☐ Registered Mail  
☒ Hand Delivered  
☐ Electronically Filed

Date Postmarked: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Scanned: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Data Entered: \_\_\_\_\_

Employee: \_\_\_\_\_

☐ Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.



# Detailed Summary

Amendment  
☐ Yes ☐ No

Use this form to summarize all disclosure reporting forms and to total monetary information

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>	<b>3. ID Number</b>
Edwin Elam campaign for mayor of waxhaw, NC			
<b>Start of Election Cycle: January 1, _____</b>		<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
<b>4) Cash on Hand at Start</b>		\$	\$
<b>RECEIPTS</b>			
<b>5) Aggregated Contributions from Individuals</b> (CRO-1205)	\$408.33	\$408.33	
<b>6) Contributions from Individuals</b> (CRO-1210)	\$	\$	
<b>7) Contributions from Political Party Committees</b> (CRO-1220)	\$	\$	
<b>8) Contributions from Other Political Committees</b> (CRO-1230)	\$	\$	
<b>9) Loan Proceeds</b> (CRO-1410)	\$1061.00	\$1061.00	
<b>10) Refunds/Reimbursements to the Committee</b> (CRO-1240)	\$	\$	
<b>11) Other Receipt Sources</b>			
<b>11a) Interest on Bank Accounts</b> (CRO-1250)	\$	\$	
<b>11b) Contributions from Not-For-Profit Organizations</b> (CRO-1250)	\$	\$	
<b>11c) Outside Sources of Income</b> (CRO-1250)	\$	\$	
<b>11d) Legal Expense Fund - Other Sources</b> (CRO-1270)	\$	\$	
<b>11e) Exempt Purchase Price Sales</b> (CRO-1265)	\$	\$	
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)	\$	\$	
<b>EXPENDITURES</b>			
<b>13) Disbursements</b>			
<b>13a) Operating Expenditures</b> (CRO-1310)	\$624.00	\$	
<b>13b) Contributions to Candidates/Political Committees</b> (CRO-1310)	\$	\$	
<b>13c) Coordinated Party Expenditures</b> (CRO-1310)	\$	\$	
<b>14) Aggregated Non-Media Expenditures</b> (CRO-1315)	\$	\$	
<b>15) Loan Repayments</b> (CRO-1420)	\$	\$	
<b>16) Refunds/Reimbursements from the Committee</b> (CRO-1320)	\$	\$	
<b>17) In-Kind Contributions</b> (CRO-1510)	\$1018.23	\$1018.23	
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)	\$	\$	
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)	\$	\$	
<b>ADDITIONAL INFORMATION</b>			
<b>20) Non-Monetary Gifts Given to Other Committees</b> (CRO-1330)	\$		
<b>21) Outstanding Loans (incl. ones from other campaigns)</b> (CRO-1430)	\$		
<b>22) Debts and Obligations owed by the Committee</b> (CRO-1610)	\$		
<b>23) Debts and Obligations owed to the Committee</b> (CRO-1620)	\$		
<b>24) Account Transfers Within the Committee</b> (CRO-1720)	\$		
<b>25) Administrative Support</b> (CRO-1710)	\$	\$	
<b>26) Forgiven Loans</b> (CRO-1440)	\$	\$	
<b>27) 48-Hour Notice Reports Sum</b> (CRO-2220)	\$	\$	
<b>28) Contributions to be Refunded</b> (CRO-1215)	\$	\$	

# Contributions from Individuals

Pg 2 of

Amendment

☐ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Edwin Elam campaign for mayor of waxhaw, NC						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
john white 111 8418 darcy hopkins dr charlotte, nc 28277					contribution	
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	131810521	check		08/17/2019	\$ 25.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
clarence tolliver 3127 helmsley ct concord, nc 28027						
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	131810521	cash		08/17/2019	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
<div style="text-align: center;"> <p>RECEIVED</p> <p>NOV 04 2019</p> <p>Union Co. Board of Elections</p> </div>						
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 125.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						



# Contributions from Individuals

Pg 1 of

Amendment

☐ Yes ☐ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Edwin Elam campaign for mayor of waxhaw, NC						
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Marion Holloway 2633 Rolling Hills dr. Monroe, NC 28110					cotribution	
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	131810521	cash		07/29/2019	\$ 150.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Charles Smith 509 N Graham st. unit 24 Charlotte, NC 28277					contribution	
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>	131810521	cash		08/16/2019	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Victor Gomez 1414 kronas cir waxhaw, nc 28173					cotribution	
					<b>e. Election Sum to Date</b>	
					\$ 33.33	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 283.33	
<b>5. Total of ALL CRO-1210 Pages</b> (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$	

CRO-1210

NOV 04 2019

NC State Board of Elections

April 2007

Union Co. Board of Elections

# Disbursements

Pg 4 of 4

Amendment

☐ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Edwin Elam for Mayor of Waxhaw						
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)  American Legion Post 208 Waxhaw, NC 28173				b. Coordinated Committee Name		d. Comments
						Payment for rental
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$ 180.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	ck # 109	C	09/18/2019	\$ 15.00		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)  WiX.com 500 Terry A Francois Blvd Sanfrancisco, CA 94158				b. Coordinated Committee Name		d. Comments
						website support and maintenance
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	charge card	k	08/25/2019	\$ 28.00	candidates web site	
				\$	provider.	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)  <b>RECEIVED</b> <b>NOV 04 2019</b> <b>Union Co. Board of Elections</b>				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date
						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
<b>5. Total only this Page</b>					\$ 43.00	
<b>6. Total of ALL CRO-1310 Pages</b>						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$	
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						



# Disbursements

Pg 3 of 4

Amendment  
☐ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Edwin Elam for Mayor of Waxhaw							
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Greater Blessed Hope Baptish Church						Donation	
Monroe, NN 28110				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$25.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CK # 106	O	08/28/2019	\$ 25.00	Donation		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Greater Blessed Hope Baptish Church						2nd donation	
Monroe, NC 28110				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CK # 107	O	0829/2019	\$ 25.00	donation		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Vive Miller						Reimburstment for loan	
Waxhaw , NC 28173				c. Level Registered (Specify)		to candidate membership	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	CK # 108	O	09/16/2019	\$100.00	loan money to candidate		
				\$	to pay membership fees at party function		
<b>5. Total only this Page</b>						\$ 150.00	
<b>6. Total of ALL CRO-1310 Pages</b>							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						\$	
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							



# Disbursements

Pg 2 of 4

Amendment

☐ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Edwin Elam for Mayor of Waxhaw						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
Postel Annex mail station  Waxhaw, NC 28173						mailing station
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$45.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	CK # 45.00	K	08/07/2019	\$ 45.00	campaign mailing address	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
American Legion Post 208 Waxhaw, NC 28173						Pament for rental
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	CK# 104.00	C	08/21/2019	\$ 80.00		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments
Trader Magezine  Waxhaw, NC 28173						
				c. Level Registered (Specify)		e. Election Sum to Date
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
	CK # 105	A	08/22/2019	\$ 96.00	Local Town magezine	
				\$		
5. Total only this Page					\$221.00	
6. Total of ALL CRO-1310 Pages						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)					\$	
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						



# Disbursements

Pg \_\_\_\_ of \_\_\_\_

Amendment

☐ Yes ☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Edwin Elam for mayor of Waxhaw							
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>							
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures							
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Mint Hill Republican Party						fund raiser	
Mint Hill, NC				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 10.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	ck#0991	C	07/20/2019	\$ 10.00	donation		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
Union County young republicans						donation	
Monroe, NC				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	ck# 101	C	08/01/2019	\$ 100.00	donation		
				\$			
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Coordinated Committee Name		d. Comments	
American Legion Post 208						reception for campaigning	
Waxhaw, NC				c. Level Registered (Specify)		e. Election Sum to Date	
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks		
	ck # 102	C	08/02/2019	\$ 100.00	campaigning		
				\$			
<b>5. Total only this Page</b>						\$210.00	
<b>6. Total of ALL CRO-1310 Pages</b>							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						\$	
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)							
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)							
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate	
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses	
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund	
O* Other							
* Codes require detailed explanation in required remarks field (k)							



# In-Kind Contributions

Pg \_\_\_\_ of \_\_\_\_

Amendment

☐ Yes

☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>
Edwin Elam campaign for mayor of waxhaw, NC		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</b>
Bob Walberger	<input type="checkbox"/> Individual* <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Palm cards (2000) Elite Printin
		<b>d. Election Sum to Date</b>
		\$ 90.00
<b>e. Description</b>	<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
Palm cards (2000) Elite Printing co.	10/05/2019	\$ 90.00
		\$
		\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</b>
John Crane	<input type="checkbox"/> Individual* <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	campaign palm cards
		<b>d. Election Sum to Date</b>
		\$ 90.00
<b>e. Description</b>	<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
Palm cards (2000) Elite Printing co.	10/05/2019	\$ 90.00
		\$
		\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</b>
	<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	
		<b>d. Election Sum to Date</b>
		\$
<b>e. Description</b>	<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
		\$
		\$
		\$
<b>4. Total only this Page</b>		\$ 180.00
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 1018.23

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# In-Kind Contributions

Pg \_\_\_\_ of \_\_\_\_

Amendment

☐ Yes ☐ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>
CCNC Political Action		
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</b>
Conservative Colition of NC PO BOX 364 Morganton, NC	<input type="checkbox"/> Individual <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	Campaign signs
		<b>d. Election Sum to Date</b> \$ 628.23
<b>e. Description</b>	<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
coalition purchased caompaigh signs for candidate	10/07/2019	\$ 628.23
		\$
		\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</b>
Charles Smith	<input type="checkbox"/> Individual* <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	campaign palm cards
		<b>d. Election Sum to Date</b> \$ 120.00
<b>e. Description</b>	<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
Palm cards (7000) Elite Printing co.	10/5/2019	\$ 120.00
		\$
		\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove		
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)	<b>b. Type of Contributor</b>	<b>c. Comments</b>
Stuart Taylor  <b>RECEIVED</b> <b>NOV 04 2019</b> <b>Union Co. Board of Elections</b>	<input type="checkbox"/> Individual* <input type="checkbox"/> Candidate <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Other Receipt Source	campaign palm cards
		<b>d. Election Sum to Date</b> \$ 90.00
<b>e. Description</b>	<b>f. Date (mm/dd/yyyy)</b>	<b>g. Fair Market Amount</b>
Palm cards (2000) Elite Printing co.	10/05/2019	\$ 90.00
		\$
		\$
<b>4. Total only this Page</b>		\$
<b>5. Total of ALL CRO-1510 Pages</b> (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$



# Loan Proceeds

Pg 1 of 1

Amendment

☐ Yes ☐ No

Use this form to report proceeds from a loan and loan endorser's information

A loan proceeds statement must accompany each loan that is from an individual

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Edwin Elam campaign for mayor of waxhaw, NC					
<b>3. Lender Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
Vivie Miller				Loaned to candidate	
		<b>c. Employer's Name/Specific Field</b>		<b>e. Start Date (mm/dd/yyyy)</b>	
				07/30/2019	
				<b>f. End Date (mm/dd/yyyy)</b>	
				09/28/2019	
<b>g. Rate</b>	<b>h. Security Pledged</b>	<b>i. Account Code</b>	<b>j. Form of Payment</b>	<b>k. Amount</b>	
%		131810521	cash	\$ 100.00	
<b>l. Full Name of Lending Institution</b>				<b>m. Loan Number</b>	
<b>4. Endorsers/Makers</b> (The people who guarantee the loan.)					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
Edwin Elam Waxhaw, NC 28173		Loaned to candidate			
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$ 961.00	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
RECEIVED NOV 04 2019 Union Co. Board of Elections					
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>	
		<b>d. Percentage</b>		<b>e. Amount</b>	
		%		\$	
<b>5. Total of ALL CRO-1410 Pages</b> (This line must be on line 9 of Detailed Summary Page CRO-1100)				\$ 1061.00	





# NORTH CAROLINA STATE BOARD OF ELECTIONS

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## Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Edwin Elam campaign for mayor waxha
- Person or committee to make loan: Edwin Elam
- Date of loan to committee: 07/30/2019 thru 09/28/2019
- Name of lending institution and account number (source):  
\_\_\_\_\_
- Amount of loan: \$961.00
- Description (if in-kind loan): \_\_\_\_\_
- Names of all parties responsible for payment of loan (guarantors):  
Edwin Elam  
\_\_\_\_\_
- Period of loan: 07/30/2019 - 09/28/2019
- Rate of interest of loan: 0
- Security pledged for loan: \_\_\_\_\_

I, \_\_\_\_\_, acknowledge that all of the information  
(Person lending money to committee)  
provided is complete, true, and accurate. I further understand I may not forgive a loan  
that has an outstanding balance to any source.

[Signature]  
Signature of Lender

11/4/2019  
Date Signed

[Signature]  
Signature of Treasurer of Committee

11/4/2019  
Date Signed

CRO-6100

Loan Proceeds Statement